FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
	(See instructions)	Office use only
1. NAME OF COMMITTEE (in	(Check if name Example: If typying, type over the lines	12FE4M5
TRUST PAC T	EAM REPUBLICANS FOR UTILIZING SENSIBLE TACTICS	
ADDRESS (number and s	228 S. Washington Street	
(Check if address	Sujte 115	
is changed)	Alexandria	VA 22314
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	kdavis@hdafec.com	
(Check if address is changed) 2. DATE M M M 0 3		
3. FEC IDENTIFICA	TION NUMBER C C00330720]
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
I certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct an	d complete
Type or Print Name of	Treasurer Keith A. Davis	
Signature of Treasurer	Electronically Filed by Keith A. Davis	Date 03 / DD / YYYYY
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V	
Office Use Only	For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

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5.	TYPE OF CO	OMMITTEE (Check One)				
	Candidate Committee:					
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate					
	Candidate Party Affiliati	ion Office Sought: House Senate President	State District			
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
	Name of Candidate					
	Party Comn					
	(d)		Democratic, epublican,etc.) Party.			
	Political Act	tion Committee (PAC):				
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	organization is a:			
		Corporation Corporation w/o Capital Stock Labor	Organization			
		Membership Organization Trade Association Coop	perative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated for committee. (i.e., nonconnected committee)	und or party			
		In addition, this committee is a Lobbyist/Registrant PAC.				
		X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
	Joint Fundra	aising Representative:				
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political			
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or modern committees/organizations, none of which is an authorized committee of a federal candidate.	nore political			
	Com	nmittees Participating in Joint Fundraiser				
		1. FEC ID number C				
		2. FEC ID number				
		3. FEC ID number				
		EEC ID number C				

Treasurer

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W	rite or Type Committee Name	·		<u>-</u>
	TRUST PAC TEAM REP	UBLICANS FOR UTILIZING SENSIBLE TA	ACTICS	
6.	Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundrais	sing Representative, or Leade	ership PAC Sponsor
	FREDERICK STEPHE	N UPTON		
	Mailing Address	285 Ridgeway		1 1 1 1 1 1 1 1 1
	. .	P O BOX 900		1 1 1 1 1 1 1 1 1
		St. Joseph		49085
		CITY	STATE 🛕	ZIP CODE
	Relationship: Connected Organization	Affiliated Committee Joint Fu	undraising Representative X	Leadership PAC Sponsor
7.	possession of Committee	A. Davis	optional), and position of th	ne person in
	Mailing Address	228 S. Washington Street		
		Suite 115		
		Alexandria		22314
	Title or Position ▼ Treasurer	CITY &	STATE A Telephone number 703	ZIP CODE A - <u>549</u> - <u>7705</u>
8.		and address (phone number optional) of designated agent (e.g., assistant treasurer		ttee; and the
	Full Name of Treasurer Keith	A. Davis		
	Mailing Address	228 S. Washington Street		
		Suite 115		
		Alexandria	VA	22314
	Title or Position ♥	CITY A	STATE	ZIP CODE A

703

Telephone number

549

7705

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Full Name of Designated Agent	Lisa R. Lisker			
Mailing Address	228 S. Washington Street			
	Suite 115			
	Alexandria	VA	22314 –	
Title or Position ▼	CITY A	STATE A	ZIP CODE A	
As	resistant Treasurer Teleph	none number 703	5497705	
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
	BB&T			
Mailing Address	300 S. Washington Street			
	Alexandria	VA	22314	
	CITY 🗻	STATE △	ZIP CODE 🛕	
Name of Bank, De	pository, etc.			
Mailing Address				
	CITY 🙇	STATE ⊿	ZIP CODE 🛕	